

KIDS HEALTH NEWS

Comments, contributions, ideas welcome. Contact – E-mail: cpt@midcentraldhb.govt.nz; Ph: 350 9164; Fax: 350 9181.



ISSUE 5
DECEMBER 2009



SUPPORTING CHILDREN'S EMOTIONAL DEVELOPMENT

A child's emotional wellbeing has a significant impact on multiple areas of their functioning. Health professionals can play a key role in assisting parents to enhance their children's emotional development. The following discussion (summarised in the acronym, ROLES), provides information which health professionals can use with parents to encourage healthy emotional development:

- **Recognising** their own and others' emotions is central to children's emotional development. Encourage children to notice and understand their own and others' feelings. This can be done in many ways including through talking, the use of books and stories and play. For example, children can be asked what a book or television character might be thinking or feeling based on their body language or facial expressions.

- **Opportunities** for fostering emotional development and intimacy occur when both children and adults experience emotion. Children learn through their experiences, and from observing and copying those around them, and parents are key teachers and role models for young children. It is important for adults to recognise their own methods of communicating and regulating emotions and the messages these send to children. Research suggests that children whose parents model healthy methods of regulating emotions are more likely to use these themselves.

- **Label** emotions for children and encourage children to label their own emotions (ie "I'm pleased you told me about coming fourth in your race. You sound very disappointed to have missed out on a place. I am here if you need to talk about it some more"). Communication occurs both verbally, and non-verbally (such as via the use of facial expressions, voice, tone, posture) so it is important to assist children to label emotions that might be conveyed non-verbally as well as those conveyed verbally.

- **Empathise** with and acknowledge children's feelings. It can be tempting to view emotions as either positive or negative. When experiencing more challenging emotions (ie anger, sadness, worry), encourage children to consider whether it is the emotion that is problematic or rather what they are doing to cope with or get rid of the emotion. For example, if a child kicks another child because they stole a valued toy, the parent might say "I can see you are feeling angry. It's okay to feel angry, but it's not okay to hurt others."

- **Solving** problems should also be encouraged with children.

It is tempting to rescue children from difficult emotional experiences but resist the impulse. Instead of trying to "fix" the problem, assist children to identify different options in emotionally charged situations. Focus them on their existing strengths and coping skills. Highlight what they are already doing that works, and how they explain these successes. The idea is to extend or build on the coping resources they already have, and to assist them with doing more of what works.

As health professionals, providing reassurance that parenting is not always smooth sailing paves the way for parents to address concerns about their child's emotional wellbeing and to acknowledge their own emotional needs. Encourage parents to consider what they need to do to replenish their own coping reserves, and to recognise that difficulties provide learning experiences and an opportunity for growth.

Reference: Harvey, S.T. (2009). Warming the Classroom Emotional Environment: Workbook Three. Palmerston North, New Zealand: Massey University Psychology Clinic.

Sarah Malthus, Clinical Psychologist, Maria Berrett, Senior Clinical Psychologist, Massey Health Conditions Psychology Service

MASSEY HEALTH CONDITIONS PSYCHOLOGY SERVICE

The Health Conditions Psychology Service at Massey University assists children, adolescents, and adults who have been diagnosed with a long term health conditions. We also see family members. The service recognises the links between physical health and psycho-social wellbeing. We see people for a wide range of reasons including: assisting people to adjust to a new diagnosis; managing the impact of a change in health condition; dealing with the challenges of an illness; coping with the impact on the family; assisting with fears, anxiety and depression; helping with adherence to recommended health advice; and a wide range of other reasons. The kind of illnesses which might be experienced by those referred to us include cardiac conditions, diabetes, asthma, cystic fibrosis and

other respiratory conditions. We also see children and adolescents (and their families), diagnosed with a wide range of other health conditions. Referrals can be made by any health professional in the hospital or in the community. Our team of Psychologists is based at the Massey Psychology clinic but also sees people in the community including in Tararua (Dannevirke and Pahiatua), Horowhenua (Foxton, Levin and Otaki) and in Feilding as well as in Palmerston North. Our service is a short to medium term one (usually 6-8 sessions). To contact us for further information and referral forms you can phone Service Coordinator, Maria Berrett (06) 350 5799 x2045 or Administrator, Gail Shirley on (06) 350 5180 Fax 06 350 2264 email G.B.Shirley@massey.ac.nz



From left to right: Dr Shane Harvey, Clinic Director; Dr Kirsty Ross, Clinical Psychologist; Anita Darragh, Intern Clinical Psychologist; Maria Berrett, Service Coordinator, Amber Barry, Clinical Psychologist; Sarah Malthus, Clinical Psychologist; Gail Shirley, Service Administrator.

KEY DATES

28 February 2010	Esplanade Day	innerwink@xtra.co.nz
7 March 2010	Children's Day	Lfitzgerald@inspire.net.nz
13-14 March 2010	Relay for Life	www.relayforlife.org.nz

Useful website: www.skylight.org.nz supporting children and young people experiencing change, loss and grief.

NURTURING YOUR CHILD'S SOCIAL-EMOTIONAL DEVELOPMENT



Relationships are the means by which babies come to know the world and their place in it. Attachment refers to the strong emotional bond that develops between children and their primary caregivers. These relationships should provide comfort, protection and encouragement, and help shield against stresses and pain. It is through nurturing relationships that children develop their social and emotional strength and learn to face challenges, develop trust, empathy and generosity. A baby's sense of trust in his caregivers is fundamental to all aspects of early development.

In the first few years of life the world is experienced through a baby's senses, and is a vital time to form a secure bond with caregivers that enhances their adjustment later in life. Touching, holding, comforting, rocking, singing and talking to babies is a natural way to play with a baby or to comfort a distressed young child. These interactions provide the stimulation the growing brain needs. Loving touches and encouraging words send messages to the baby that they are somebody special. When a baby is loved for who they are, they in turn learn to love others. This process helps infants and children to build healthy relationships and a positive sense of self.

It is important as parents and caregivers of young children to observe what your child is doing. This reveals cues about what makes your child tick and why children behave as they do. Understanding and responsive parents and caregivers helps to develop a child's confidence and self-esteem. Allow your baby or young child to explore situations and provide them just enough support to help them experience the success of using new skills. Parents and caregivers should try and model good behaviour and have sensitive responses to stressful or conflicting events. This contributes to a child's growing sense of security and trust.

A secure attachment base allows the growing baby to explore and develop, enhancing their healthy social and emotional development.

References:

- Zero to Three website
- Passer, M & Smith, R. 2009. *Psychology: the science of mind and behaviour*. McGraw & Hill New York.
- Berkx, L. 2007. *Development through the lifespan* 4th ed. Pearson USA.

**Gabrielle Scott, Coordinator,
Child Development Service,
MidCentral Health**

A SUNSMART SUMMER

From September to the end of March, especially between 11am and 4pm, we need to be SunSmart.



SUNSMART

We need to protect our families from the sun's ultraviolet radiation (UVR). The sun's UVR can burn a young child's delicate skin in a few minutes. UVR can penetrate light cloud, and therefore can burn skin on overcast days.

- UVR cannot be felt, is invisible and its effects are delayed; its presence is not immediately obvious.

WHO NEEDS TO BE SUNSMART?

Everybody needs to be SunSmart. The sun's UVR can burn a baby or young child's delicate skin in a few minutes.

People with fair skin need to be especially SunSmart. People with darker skin also need to be SunSmart, as they can still get burned.

We need to make sure babies and young children do not get burned by the sun. Being sunburned as a baby or child increases the risk of developing skin cancers when you are older.

SWIMMING AND OTHER WATER ACTIVITIES

On outings at beaches, rivers & pools advise families to:

- Be in the shade whenever possible. Pack sunscreen and a sun umbrella along with the picnic food.
- Wear SunSmart hats
- Wear SunSmart clothing, including sun protective swimsuits and rash vests for children that keep their shoulders, backs, fronts and tops of the legs covered
- Have broad spectrum SPF 30 + sunscreen on any skin not covered by clothing. Use water resistant sunscreen and put on more sunscreen after being in the water.
- Be cautious about using sunscreen on babies under one year of age. (It's best to keep them out of strong sunlight). If toddlers have to be in the sun, use recommended sunscreen on uncovered skin. Make sure that sunscreen is water resistant if they are playing in water.

**For more information, contact Kerry Hocquard,
Cancer Society ph 356 5355.**

"IT'S YOUR CHOICE"

WellChild providers work hard to improve health outcomes for children. Through their collaborative effort and an agreed Memorandum of Understanding, WellChild providers have produced the new Well Child Form "It's Your Choice". This form describes the WellChild visit and lists the choice of WellChild providers within our region. The referral form is enclosed within.

Copies of this newly released form are available from:



- WellChild providers
- Delivery Suite, Palmerston North Hospital
- Public Health, Health on Main
- Community Paediatric Service
- Barb Bradnock, Funding Division, MidCentral Health

safe sleep ESSENTIALS



Every year, about 60 babies die suddenly in their sleep.

Most deaths are preventable.

Safe sleep means face up, face clear, smokefree every time and place a baby sleeps.

change FOR OUR children

www.changeforourchildren.co.nz

Information on preventing SUDI (sudden unexpected death in infancy)

HOW TO GIFT YOUR CHILD A HEALTHY SMILE FOR CHRISTMAS

(2 MANY SWEETS = 2 MUCH SUGAR = TOOTH DECAY)

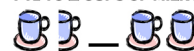


THREE KEY POINTS FOR A HEALTHY SMILE:

- **WATER** – FRUIT JUICES AND SWEET DRINKS CONTAIN SUGAR
SUGAR + BACTERIA = ACID WHICH DESTROYS TEETH.
WATER IS FREE.

- **BRUSHING** – TEETH NEED TO BE BRUSHED TWICE A DAY TO CLEAR AWAY FOOD THAT IF LEFT, MAY CAUSE TOOTH DECAY.

- **CALCIUM** - MILK CONTAINS CALCIUM AND MAKES FOR STRONG TEETH AND BONES. CHILDREN NEED 1 1/2 TO 2 CUPS OF MILK A DAY FOR 1 TO 3 YEAR OLDS



- 3 1/2 CUPS A DAY FOR 4 TO 8 YEARS OLDS.



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